

Name Change & address 2007-424-T - 226190
Address - 2007-410-T - 226191

CLASS C AMENDMENT FORM

File the original with:

Public Service Commission of South Carolina
Clerk's Office
Motor Carrier Matters
P.O. Box 11649
Columbia, S.C. 29211
(803) 896 - 5100
FAX (803) 896-5199

Mail or fax a copy to:

S.C. Office of Regulatory Staff
Transportation Department
1401 Main Street, Suite 900
Columbia, S.C. 29201
(803) 737-0578
FAX (803) 737-0815

RECEIVED

SEP 29 2010

DATE: 9/28/10

ORS
T.T.W.W/W

SEP 30 2010

PSC SC
CLERK'S OFFICE

I have the following Certificate:

☐ Class C Taxi # _____ ☒ Class C Charter # 7914-A ☐ Class C Charter Bus
☐ Class C Non-Emergency # _____

Please consider this as my request for the following amendment(s) to my Certificate:

☒ Name Change

From: James C. Robertson DBA: Dream Riders Transportation
(Current Name) (Current DBA if applicable)

TO: James C. Robertson DBA: Dream Riders Limo
(New Name) (New DBA if applicable)

☐ Scope of Authority

From: _____ To: _____
(Current Scope) (New Scope)

☐ Passenger Limit

From: _____ To: _____
(Current Limit Number) (New Limit Number)

James C. Robertson, dba:
Dream Riders Limo
Name & DBA if DBA is applicable)

Myrtle Beach, SC 29512
(City, State, Zip Code)

(843) 267-1450
(Telephone Number)

1001 Lands End
Unit 1002
(Street and/or Mailing Address)

(Signature)

(Title) Owner, President, etc.